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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/037,067			ing Date 21/2001	☐ To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY			HER THAN ALL ENTITY
FOR			IUMBER FI	.ED NU	MBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A		ı	N/A	
	SEARCH FEE (37 CFR 1 16(k), (i),	or (m))	N/A		N/A	1	N/A		ı	N/A	
	EXAMINATION FE (37 CFR 1,16(o), (p),		N/A		N/A		N/A		l	N/A	
TO' (37	TAL CLAIMS CFR 1.16(i))		mir	us 20 = *		l	x \$ =		OR	x s =	
IND (37	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 = *			l	X \$ =			X \$ =	
APPLICATION SIZE FEE (37 OFR 1.16(e))   If the specification and drawings excess sheets of paper, the application size is \$250 (\$125 for small entity) for eac additional 50 sheets or fraction theres \$5 U.S.C. 41(e)(1)(G) and 37 GFR 1.					on size fee due for each n thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))											
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		ı	TOTAL	
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY											
AMENDMENT	02/02/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	- 20	Minus	·· 20	= 0	ı	x \$ =		OR	X \$52=	0
	Independent (37 CFR 1.16(h))	• 3	Minus	···3	- 0	ı	X \$ =		OR	X \$220=	0
	Application Size Fee (37 CFR 1.16(s))								_		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))					П			OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16(i))		Minus		=		X \$ =		OR	x s =	
M	Independent (37 CFR 1 16(h))		Minus	***	-	l	X \$ =		OR	x s =	
Į.	Application Size Fee (37 CFR 1.16(s))								l		
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
									OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "O' in column 3.  *If the "Highest Number Previously Paid For' IN THIS SPACE is less than 2, enter "20".  *If the "Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For' IClaid or independent) is the highest number found in the appropriate box in column 1.  The "Highest Number Previously Paid For' IClaid or independent) is the highest number found in the appropriate box in column 1.											

This collection of information is required by 37 CFR 11.6. The information is required to defining or retain a benefit by the public which is to file (and by the DSF) process) an application. Confidentially 39 cycered by 38 cycered by 38 CSR 22 and 37 CFR 11.4. This collection is estimated to take 12 inmulates to complete, including gathering, preparing, and submitting the completed application form to the USF 17.0. Time will wary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the CFR Information Cities. U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandrius, VA 22319-1.8 D.D. NOT ISSN 17.0. D. NOT 1550, Alexandrius, VA 22319-1.8 D.D. NOT ISSN 17.0. SOURCE SERVICE OF COMMENT OF COMMISSION CONTRACT OF COMMIS